

City of Northampton

AFFADAVIT OF WAGE COMPLIANCE

Name of Business: Cancer Connection Thrift Shop

Location of Business: 375 South Street

The Northampton City Council, in determining whether to issue, re-issue, modify, suspend or revoke a license. under G.L. c. 140, shall require that a potential or current licensee certify that they are not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act. The City Council may require a wage bond or insurance be posted by any potential licensee who does not certify that they are not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act. Licensees that are subject to a state or federal debarment for violation of the above laws, either voluntarily or involuntarily, or that have been prohibited from contracting with the Commonwealth or any of its agencies or subdivisions shall be prohibited from holding, or continuing to hold, licenses issued under G.L. c. 140, for the entire period of debarment or other stated time period.

Applicants must check box 1 or box 2 as applicable and must sign this Form, certifying compliance with the requirements set out in this Form. This Form must be included with the application.

AFFADAVIT: (V) (Choose 1 below)



This License applicant is not subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act within the last three years.



This License applicant is subject to a federal or state criminal or civil judgment, administrative citation, order or final administrative determination resulting from a violation of G.L. c. 149, c. 151, or the Fair Labor Standards Act within the last three years. This applicant will provide a wage bond or wage insurance for the period of the license.

(V) Christine Quinn
(Typed or printed name of applicant)

(V) Christine Quinn
(Signature)

City of Northampton
Application for Annual License

NORTHAMPTON, MASS., _____

To the Honorable City Council of the City of Northampton:

The undersigned respectfully petitions your honorable body for a License as follows:

Name of Business: Cancer Connection Thrift Shop

Type of License: Secondhand Dealer

Location of Business: 375 South Street

Print Name of Applicant: (V) Christine Quinn

Signature of Applicant: (V) Christine Quinn

Address of Applicant: (V) No. 20 Street Zabek Dr. Easthampton MA
01087

In City Council, _____

Referred to Committee on Licenses.

ATTEST:

City Clerk

In Committee on Licenses, _____

Voted to recommend that Petition ____ be
granted, _____ not granted

ATTEST:

Clerk

In City Council, _____ (date)

Voted that Petition be ____ granted
____ not granted

Attest: _____ Clerk to City Council

City of Northampton
STATEMENT OF ALL TAXES FILED AND PAID

Name of Business: Cancer Connection Thrift Shop

Location of Business: 375 South Street

The license (as a/for a) Secondhand Dealer will not be issued unless this certification clause is signed by the applicant listed on the license.

I, (V) Christine Quinn (print name of owner or authorized agent of the business) certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes as required under law.

(V) Christine Quinn

Signature of Owner or Agent

(V) _____ or (V) _____

Social Security Number

Federal Identification Number

Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licenses who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Massachusetts General Law, chapter 62C, section 49A.

City of Northampton
Treasurer/Collector's Office
Permit Denial Form

Revised 11-30-2018

REQUESTED BY: **Pamela L. Powers, City Clerk**

Name of Person, Corporation or Business: **Cancer Connection Thrift Shop**

Location of Property, Service or Address: **375 South Street, Northampton, MA 01060**

All permits denied for outstanding amounts must receive confirmation of good standing from the Treasurer/Collector's Office PRIOR to issuance of the permit.

For Tax Collector's/Treasurer's Office Use Only

Please list below any tax, assessed to your office that is unpaid for twelve (12) months or more after its due date, unless there is a pending abatement or appeal before the Appellate Tax Board, for the person, corporation, or business entity noted above.

This is a tax exempt entity for FY21 and no amounts are outstanding

Signed: Kristine Bissell

Dated: April 7, 2021

Adopted 5-21 1992 [Ch14 S.14-21 of the 1977 Code]
Denial/Revocation of License

City of Northampton